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TECH CENTER 1600/2900 PTO-S921 (08-00)

Approved for use through 10/31/2002 GMB-0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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0130
1651TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/076,383
		Filing Date	02/19/2002
		First Named Inventor	Jim C. Spain
		Group Art Unit	MAY 08 2002
		Examiner Name	TECH CENTER 1600/2900
Total Number of Pages in This Submission	5	Attorney Docket Number	AFD471

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MAY 08 2002

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Declaration by Docket Clerk	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Charles E. Bricker, Reg.No. 26,715
Signature	
Date	03/26/2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

03/26/2002

Typed or printed name	Charles E. Bricker
Signature	
	Date
	03/26/2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FEES TRANSMITTAL

TOTAL AMOUNT OF PAYMENT (\$ 130)

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

AF 01-0465

Deposit Account Name

Department of the Air Force

Charge Any Additional Fee Required under 37 CFR 1.16 and 1.17 Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)

2. Payment Enclosed:

Check Money Order Other

FEES CALCULATION (fees effective 10/01/2000)

1. FILING FEE

Lge Entity Fee Code	Lge Entity Fee (\$)	Sm. Entity Fee Code	Sm. Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	970	Utility Filing Fee	
106	330	206	185	Design Filing Fee	
107	510	207	255	Plant Filing Fee	
108	740	208	370	Reissue Filing Fee	
114	160	214	80	Provisional Filing Fee	

SUBTOTAL (1) (\$)

2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
11	- 20 = 0	X 18 = 0	= 0
2	- 3 = 0	X 84 = 0	= 0

Large Entity **Small Entity**

Fee Code	Fee (\$)	Fee code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim
109	84	209	40	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

Complete if Known					
Application Number		10/076,383			
Filing Date		February 19, 2002			
First Named Inventor		Jim C. Spain			
Group Art Unit		MAY 08 2002			
Examiner Name		TECH CENTER 1600/2900			
Attorney Docket Number		AFD471			
FEES CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	85	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
134	130	150	150	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner Action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	400	216	200	Extension for response within second month	
117	920	217	460	Extension for response within third month	
118	1,440	218	895	Extension for response within fourth month	
119	320	219	155	Notice of Appeal	
120	320	220	155	Filing a brief in support of an appeal	
121	280	221	155	Request for oral hearing	
138	1,510	152	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application	
141	1,280	241	640	Petition to revive unintentionally abandoned application	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	152	150	Petitions to the Commissioner	130
123	50	153	50	Petitions related to provisional applications	
126	180	158	180	Submission of Information Disclosure Statement	
581	40	159	40	Recording each patent assignment per property	
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)					
Other fee (specify)					
				SUBTOTAL (3) (\$)	130

*Reduced by Basic Filing Fee Paid

Complete (if applicable)

SUBMITTED BY			
Typed or Printed Name	Charles E. Bricker	Reg. Number	26,715
Signature	<i>Charles E. Bricker</i>	Date: 03/26/2002	Deposit Account User ID

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